## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |   |  |   |              |                          | -                | SMALL ENTITY TYPE OR |                     |                        | OTHER THAN<br>SMALL ENTITY |                     |                        |
|--|---|--|---|--------------|--------------------------|------------------|----------------------|---------------------|------------------------|----------------------------|---------------------|------------------------|
| TOTAL CLAIMS   |   |  | 8                                       |              | ; .                      | -                |                      | RATE                | FEE                    |                            | RATE                | FEE                    |
| FOR  |   |  | NUMBER FILED                            |              | NUMBER EXTRA             |                  |                      | BASIC FEE           | 355.00                 | OR                         | BASIC FEE           | · 710.00               |
| TOTAL CHARGEABLE CLAIMS  |   |  | 8 minus 20=                             |              | • 0                      |                  |                      | X\$ 9=              |                        | OR                         | X\$18=              |                        |
| INDEPENDENT CLAIMS   |   |  | \ minus 3 =                             |              | • 0                      |                  |                      | X40=                |                        | OR                         | X80=                |                        |
| MU   | TIPLE DEPEN                                 | DENT CLAIM P   | RESENT                                  |              |                          |                  |                      | +135=               |                        | OR                         | +270=               |                        |
| * If   | the difference                              | in column 1 is   | less than zero, enter "0" in column 2   |              |                          | '                | TOTAL                |                     | OR                     | TOTAL                      | 0710.               |                        |
|  | CI  |  | AMENDED - PART II (Column 2) (Column 3) |              |                          | ı                | SMALL E              | NTITY               | OR                     | OTHER THAN SMALL ENTITY    |                     |                        |
|  |   | (Column 1)<br>CLAIMS   |   |              | HEST                     | (Column 3)       | 1 1                  |                     |                        |                            |                     | ADDI-                  |
| NT A   |   | REMAINING<br>AFTER<br>AMENDMENT  |   | NUN<br>PREVI | IBER<br>OUSLY<br>FOR     | PRESENT<br>EXTRA |                      | RATE                | ADDI-<br>TIONAL<br>FEE |                            | RATE                | TIONAL                 |
| AMENDMENT  | Total                                       | *  | Minus                                   | **           |                          | =                |                      | X\$ 9=              |                        | OR                         | X\$18=              |                        |
| 4ME!   | Independent                                 | *  | Minus                                   | ***          | T 01 4114                | =                |                      | X40=                |                        | OR                         | X80=                |                        |
|  | FIRST PRESE                                 | NTATION OF M   | ULTIPLE DEF                             | PENDEN       | I CLAIM                  |                  |                      | +135=               |                        | OR                         | +270=               |                        |
|  |   |  |   |              |                          |                  |                      | TOTAL               |                        | OR                         | TOTAL<br>ADDIT, FEE |                        |
|  |   |  |   |              |                          |                  |                      | ADDIT. FEE          |                        |                            | ADDII. FEE          |                        |
| <b> </b>   | Adrimonate market and services restrictions | (Column 1) CLAIMS  |   |              | ımn 2)<br>HEST           | (Column 3)       | 4,                   |                     |                        |                            |                     | 4001                   |
| NT B   |   | REMAINING<br>AFTER<br>AMENDMENT  |   | NUI<br>PREV  | MBER<br>IOUSLY<br>FOR    | PRESENT<br>EXTRA |                      | RATE                | ADDI-<br>TIONAL<br>FEE |                            | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT  | Total                                       | *  | Minus                                   | **           |                          | =                |                      | X\$ 9=              |                        | OR                         | X\$18=              |                        |
| ME   | Independent                                 | *  | Minus                                   | ***          |                          | =                |                      | X40=                |                        | OR                         | X80=                |                        |
|  | FIRST PRESE                                 | NTATION OF M   | IULTIPLE DEI                            | PENDEN       | II CLAIM                 |                  |                      | +135=               |                        | OR                         | +270=               |                        |
|  |   |  |   |              |                          |                  |                      | TOTAL<br>ADDIT. FEE |                        | OR                         | TOTAL<br>ADDIT. FEE |                        |
|  | (Column 1) (Column 2) (Column 3             |  |   |              |                          |                  |                      |                     |                        |                            | <b>V</b>            |                        |
|  |   | CLAIMS   |   | HIG          | HEST                     |                  | ٦                    |                     | ADDI-                  | 1                          | <u> </u>            | ADDI-                  |
| AMENDMENT C  |   | REMAINING<br>AFTER<br>AMENDMENT  |   | PREV         | MBER<br>VIOUSLY<br>D FOR | PRESENT<br>EXTRA |                      | RATE                | TIONAL<br>FEE          |                            | RATE                | TIONAL<br>FEE          |
| <b>DME</b>   | Total                                       | *  | Minus                                   | **           |                          | =                |                      | X\$ 9=              |                        | OR                         | X\$18=              |                        |
| NÉ   | Independent                                 | *  | Minus                                   | ***          |                          | =                | _                    | X40=                |                        | OR                         | X80=                |                        |
| I  | FIRST PRESE                                 | ENTATION OF I  | MULTIPLE DE                             | PENDE        | NT CLAIM                 | 1                |                      |                     |                        | 104                        |                     | 1                      |
|  |   | d la Jaar He ar  | the entering of                         | umn a um     | ita "O" in a             | olumn 2          |                      | +135=               |                        | OR                         | +270=               | <u> </u>               |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |   |  |   |              |                          |                  |                      |                     |                        |                            |                     |                        |
|  | The "Highest Nu                             | ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter 3.  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |              |                          |                  |                      |                     |                        |                            |                     |                        |

| 1  |  | •   |               |   |                  |        |                   |                        |             | <u> </u>         |                   |                                       |
|--|--|---|---------------|---|------------------|--------|-------------------|------------------------|-------------|------------------|-------------------|---------------------------------------|
| PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2001  CLAIMS AS FILED - PART I  SMALL ENTITY |  |   |               |   |                  |        |                   |                        |             | Docket           | Number            |                                       |
|  |  |   |               |   |                  |        |                   |                        |             |                  |                   |                                       |
| Ir   | TOTAL CL   | VIVIC                                       | (Co           | (Column 1) (Column 2)                     |                  |        |                   |                        | ΙY          | OR               | OTF<br>SMA        | IER TH,<br>LL ENT                     |
| 1L   | TOTAL CLAIMS   |   |               |   |                  |        |                   | TE F                   | EE          | 7                | RAT               |                                       |
|  | FOR '  | <del></del>                                 | NUM           | NUMBER FILED NUMBER EXTRA                 |                  |        | BASIC             | FEE 37                 | 0.00        | OR               | BASIC F           |                                       |
|  | TOTAL CHAP   | RGEABLE CLAIN                               | MS            | minus 20= *                               |                  | X\$ 9= |                   |                        |             | 1                | X\$18             |                                       |
| 10   | NDEPENDEN  | NT CLAIMS                                   |               | minus 3 = *                               |                  |        | X42               |                        |             | OR               |                   |                                       |
| ~  | IULTIPLE DE  | PENDENT CLAI                                | M PRESENT     |   | П                | 7      |                   | =                      |             | OR               | X84=              |                                       |
| *  | If the differe   | ence in column                              | 1 is less tha | In Zoro, enter "0                         | " in column O    | !      | +140              | )=                     |             | ÓR               | +280=             | :                                     |
|  | ß  |   |               |   |                  | ٠.     | TOTA              | AL.                    |             | OR               | TOTAL             |                                       |
|  | A  | (Column                                     |               | DED - PART I<br>(Column                   | 2) (Column 3     | 3)     | SMAL              | L ENTI                 | ГҮ (        | OR.              | OTHE<br>SMALE     | R THAI                                |
| <b>AMENDMENT A</b>   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMEN    |               | HIGHEST<br>NUMBER<br>PREVIOUS<br>PAID FOR | PRESENT EXTRA    |        | RATE              | ADI<br>TION<br>FE      | IAL         |                  | RATE              | ADE                                   |
| Š  | Total  | * 10  | Minus         | ** 20                                     | =                | 1      | X\$ 9=            |                        | 1           |                  | X\$18=            | FEI                                   |
| AME  | Independer   |   | Minus         | *** 3)                                    | =                | 7      | X42=              | +                      |             | ~`}-             |                   |                                       |
|  | FIRST PRE  | SENTATION OF                                | MULTIPLE (    | DEPENDENT CL                              | AIM              | 1      | · ./              | 4_                     | $  $ $^{c}$ | R                | X84=/             | <del> </del>                          |
| •  |  |   |               | •   |                  | ı      | <b>1</b> /40≟     |                        | . 0         | B                | +280 <del>=</del> |                                       |
|  | •  | · ·   |               |   |                  |        | TOTA<br>ODIT. FE  |                        | jo          | R <sub>AD</sub>  | TOTAL<br>DIT. FEE |                                       |
| 0  |  | (Column 1) CLAIMS                           |               | (Column 2)<br>HIGHEST                     | ) (Column 3)     | 7 -    |                   |                        | <del></del> |                  |                   |                                       |
|  |  | REMAINING<br>AFTER<br>AMENDMENT             |               | NUMBER<br>PREVIOUSLY<br>PAID FOR          | PRESENT<br>EXTRA |        | RATE              | ADDI<br>TIONA<br>FEE   |             | -                | RATE              | ADDI<br>TIONA<br>FEE                  |
|  | Total  | *   | Minus         | **  | =                |        | X\$ 9=            |                        | OF          | $\int_{X}$       | \$18=             |                                       |
| , j.,  | ndependent   | <u> </u>                                    | Minus         | ***                                       | =                |        | X42=              |                        | 7           | -                | (84=              | <u></u>                               |
|  | ••   | ENTATION OF M                               | IULTIPLE DE   | PENDENT CLAI                              | М                | ┞      |                   | }                      | OF          | <b>`</b>  -      | 104=              | <u> </u>                              |
|  | ***  |   |               |   | ı                | Ŀ      | +140=             |                        | OR          | +3               | 280=              |                                       |
| •  |  |   |               | · ·                                       | •                | AC     | TOTAL<br>DIT. FEE | <u> </u>               | OR          | ADD              | TOTAL<br>IT. FEE  |                                       |
|  |  | (Column 1) CLAIMS                           |               | (Column 2)<br>HIGHEST                     | (Column 3)       | _      |                   |                        |             |                  |                   |                                       |
|  |  | REMAINING<br>AFTER<br>AMENDMENT             |               | NUMBER<br>PREVIOUSLY<br>PAID FOR          | PRESENT<br>EXTRA |        | RATE              | ADDI-<br>TIONAL<br>FEE |             | R.               | ATE .             | ADDI-<br>TIONAL                       |
| To   | tai  | *   | Minus         | **  | = .              |        | (\$ 9=            | <u> </u>               |             | \                | 18=               | FEE                                   |
|  | dependent  | *   | Minus         | ***                                       | = .              | 1      |                   | <del></del>            | OR          | -                |                   |                                       |
| FI   | RST PRESE  | NTATION OF MU                               | ILTIPLE DEF   | PENDENT CLAIM                             |                  | 1      | (42=              | ,                      | OR          | X                | 34=               | · · · · · · · · · · · · · · · · · · · |
| the  | the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |               |   |                  |        |                   |                        | OR          | +28              | 30=               |                                       |
|  |  |   |               |   |                  | ADD    | TOTAL<br>T. FEE   |                        | OR ,        |                  | OTAL              |                                       |
|  |  | nber Previously Paid<br>per Previously Paid |               |   |                  | und Ir | the appro         | opriate box            |             | ADDIT.<br>imn 1. | ree I             |                                       |

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